

FORM

REPORT OF CAMPAIGN CONT		
 Quarterly Report:	'	

(Check one:) 1st 2nd 3rd 4th

Final Report (Fund balance on Line E must be \$0)

Amendment of the Report Indicated Above

REGERMED

JUL 08 2021

State Board of Elections Springfield Office

Full name and complete mailing address of Political Committee: CHECK FOR ADDRESS CHANGE

Brian Gustafson for Coroner 2215 20 1/2 Ave

COMMITTEE ID #

Committee ID: 21070

2215 20 1/2 Ave	11			
Rock Island, IL 61201-4506	·			
E-mail address: 6qustalson ou rock-islandilis	HECK FOR E-MAIL ADDRESS CHANGE			
REPORTING PERIOD CASH AVAILABLE AT BEGINNING	ALL POLITICAL COMMITTEES RETURN TO:			
1/ / 1/ OF REPORTING PERIOD:	STATE BOARD OF ELECTIONS STATE BOARD OF ELECTIONS			
91-21 6-30-21 \$ 100,00	2329 5 MacARTHUR BLVD OR JAMES R THOMPSON CENTER 100 W RANDOLPH, STE 14-100			
FROM THRU Repeat this amount in SECTION D, Line (A)	SPRINGFIELD, IL 62704-4503 CHICAGO, IL 60601-3232			
SECTION A — RECEIPTS	SECTION B — EXPENDITURES			
1. Individual Contributions				
a. Itemized (from Schedule A): \$.00 (1a)	6. Transfers Out			
20	a. Itemized (from Schedule B): \$			
b. Not-Itemized: \$. 00 (1b)	b. Not-Itemized: \$00(6b)			
2. Transfers In	7. Loans Made			
a. Itemized (from Schedule A): \$00 (2a)	a. Itemized (from Schedule 8): \$(7a)			
b. Not-Itemized: \$(2b)	b. Not-Itemized: \$(7b)			
3. Loans Received	8. Expenditures			
a. Itemized (from Schedule A): \$(3a)	a. Itemized (from Schedule B): \$(8a)			
b. Not-Itemized \$(3b)	b. Not-Itemized . \$(8b)			
4. Other Receipts	9. Independent Expenditures			
a. Itemized (from Schedule A): \$(4a)	a. Itemized (from Schedule 8-9): \$ \mathcal{O} (9a)			
b. Not-Itemized \$	b. Not-itemized \$			
TOYAL RECEIPTS (1a thru 4b) \$	TOTAL EXPENDITURES (6a thru 9b)\$ (TE)			
	SECTION C - DEBTS AND OBLIGATIONS			
5. in-Kind Contributions	(include previously reported unpaid debts)			
a. Itemized (from Schedule I): \$(5a)	10. a. Itemized (from Schedule C): \$ 4372 (10a)			
b. Not-itemized \$(5b)	b. Not-itemized \$(10b)			
TOTAL IN-KIND (5a + 5b) \$(TI)	TOTAL DEBTS & OBLIGATIONS \$ 5.372.00			
***************************************	SECTION D — CASH BALANCE			
Name and address of person submitting this report if other	. ,			
than the committee's Chair or Treasurer:	Cash available at beginning of reporting period: \$(A)			
,	Total Receipts from Section A (TR): \$(B)			
	Total cash (A) plus (B): \$ 100,00 (C)			
	Total Expenditures from Section B (TE); \$_00 (D)			
"	Funds available at close of reporting period (C minus D): \$ 100. (E)			
	Investments total (if applicable): §_00 (F)			
VERIFICATION;) DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBL	TIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND			
VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBL STATEMENTS! ALS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOW ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE CUP TO \$5000.	VLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND			

SIGNATURE OF COMMITTEE

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REVISED 11/2018

07-07-2021 DATE To: 12177825959

;3095583646

NAME OF POLITICAL COMMITTEE:

Brian Gustafson for Coroner 2215 20 1/2 Ave Rock Island, IL 61201-4506 REPORTING PERIOD

FOR OFFICE USE ONLY

SCHEDULE C

DEBTS AND OBLIGATIONS

POLITICAL COMMITTEE IDENTIFICATION No.

21010

SEE PAMPHLET "A	GUIDE TO	CAMPAIGN DI	ISCLOSURE" FOR GL	JIDANGE.
FULL NAME, MAILING ADDRESS, AND ZIP	DATE	ORIGINAL AMOUNT	CUMULATIVE PAYMENT TO DATE ON DEBT	OUTSTANDING BALANCE AT THE CLOSE OF THIS PERIOD
BRIAN W. GUSTAFSON R.N. 2215-2012 AVENUE ROCK FSLAND, IL. GILDI	6-23-13	\$ 1500.00	7,00	\$ 1500,00
BRIAN W. GUSTAFSON R.N. 2215-2012 AVENUE ROCK TERMO, FL. 61201	11-1-14	2000,00	E. 00	2000.00
BRIAN W. GUSTAFSON RN. 2215-2012 AVENNE ROCK ISLAND, IL. COLLOI	8-13-18	\$1872.00	\$0,00	\$1872.00
0 12 4 10	1	I	TOTAL THIS	SPERIOD \$ 5372.00

TOTAL THIS PERIOD \$ 5372

X CHECK IF LAST PAGE OF THIS SCHEDULE

THIS FORM MAY BE REPRODUCED

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REVISED 1/1/11